Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ire identification (for	Thomas First name	First name
		nple, your driver's use or passport).	Middle name	Middle name
		g your picture	Albright	
		tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
	maio assu	ide your married or den names and any imed, trade names and g business as names.		
	any such parti	NOT list the name of separate legal entity as a corporation, nership, or LLC that is illing this petition.		
3.	you num Indi	the last 4 digits of Social Security or federal vidual Taxpayer tification number	xxx-xx-3943	

Official Form 101

Del	otor 1 Thomas Albright		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your Employer Identification Number (EIN), if any.		
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		3146 Villa Dr. Toledo, OH 43614	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Lucas	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any	Over the last 180 days before filing this petition, I have lived in this district longer than in any other

district.

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

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other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	tor 1 Thomas Albright					Case number (if known)
Part						
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	☐ Cha	pter 7			
		☐ Cha	pter 11			
		☐ Cha	pter 12			
		■ Cha	pter 13			
	Ham you will not the fee		:		a léile man matition. Discourle	
8.	How you will pay the fee	al oı	bout how y	ou may pay. Typio attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more detail ourself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check wit
					allments. If you choose this optic	on, sign and attach the Application for Individuals to Pay
			he Filing F	ee in Installments	(Official Form 103A).	
						n only if you are filing for Chapter 7. By law, a judge may ur income is less than 150% of the official poverty line th
		a	oplies to yo	ur family size and	d you are unable to pay the fee ir	n installments). If you choose this option, you must fill ou cial Form 103B) and file it with your petition.
		U	е Аррисаи	on to have the Ci	napter / Filling Fee Walved (Offic	aal Form 1036) and the it with your petition.
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		— 100.	District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.				
	affiliate?					
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor		VA/In a co	Relationship to you
			District		When	Case number, if known
 11.	Do you rent your	■ No.	Go to	line 12.		
	residence?	☐ Yes.	Has y	our landlord obtai	ned an eviction judgment agains	t you?
				No. Go to line 1	2.	
				Yes. Fill out <i>Init</i> this bankruptcy		Judgment Against You (Form 101A) and file it as part of

Deb	tor 1 Thomas Albright				Case number (if known)
arı	Report About Any Bu	ısinesses	You Owr	n as a Sole Propriet	or
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
3.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	proceed you are	under Su choosing to w stateme)(B). I am i	bchapter V so that it to proceed under Sul nt, and federal incom not filing under Chap filing under Chapter 1	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or behapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
	0.0.0. § 101(01D).	☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.	I am i		11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
art	4: Report if You Own or	Have Any	y Hazardo	ous Property or Any	Property That Needs Immediate Attention
4.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 **Thomas Albright** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Thomas Albright			Ca	ase number (if known)	
Par	t 6: Answer These Questi	ons for Re	porting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer deb rsonal, family, or household purpo	ts are defined in 11 U.S.C. § 101(8) as "incurred se."	by an
			☐ No. Go to line 16b.			
			■ Yes. Go to line 17.			
		16b.		business debts? Business debts vestment or through the operation	are debts that you incurred to obtain of the business or investment.	
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer debts	or business debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.		Do you estimate that after any exavailable to distribute to unsecured	empt property is excluded and administrative exploreditors?	enses
	administrative expenses are paid that funds will		□ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mil □ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 n	llion ☐ \$1,000,000,001 - \$10 billion illion ☐ \$10,000,000,001 - \$50 billion	
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 millio □ \$10,000,001 - \$50 mil □ \$50,000,001 - \$100 mil □ \$100,000,001 - \$500 n	llion	1
Par	t 7: Sign Below					
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that	t the information provided is true and correct.	
					if eligible, under Chapter 7, 11,12, or 13 of title 1 er, and I choose to proceed under Chapter 7.	1,
				I not pay or agree to pay someone the notice required by 11 U.S.C. §	who is not an attorney to help me fill out this 342(b).	
		I request	relief in accordance with the	chapter of title 11, United States 0	Code, specified in this petition.	
		bankrupto and 3571	cy case can result in fines up		g money or property by fraud in connection with a up to 20 years, or both. 18 U.S.C. §§ 152, 1341,	
		Thomas	nas Albright s Albright e of Debtor 1	Signature	e of Debtor 2	
		Executed	on April 24, 2023 MM / DD / YYYY	Executed	d on MM / DD / YYYY	

Official Form 101

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Debtor 1	Thomas Albright	Case number (if known)	
		_	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott A. Ciolek	Date	April 24, 2023
Signature of Attorney for Debtor		MM / DD / YYYY
Scott A. Ciolek 0082779		
Printed name		
Ciolek Itd		
Firm name		
901 Washington St.		
Toledo, OH 43604		
Number, Street, City, State & ZIP Code		
Contact phone 419-740-5935	Email address	info@counselor.pro
0082779 OH		
Bar number & State		

Fill	n this information to identify yo	our case:			
	tor 1 Thomas Albrig				
	First Name	Middle Name	Last Name		
1 -	tor 2 se if, filing) First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the	e: NORTHERN DISTRICT	OF OHIO		
Cas	e number				
(if kn				_	k if this is an
				amer	nded filing
Ωt.	isial Form 1060um				
	icial Form 106Sum	e and Liabilities ar	nd Certain Statistical Information		12/15
Be a	s complete and accurate as pos mation. Fill out all of your sche original forms, you must fill ou	sible. If two married people dules first; then complete th	e are filing together, both are equally responsible for information on this form. If you are filing amend to the box at the top of this page.		
				Your:	assets
					of what you own
1.	Schedule A/B: Property (Officia 1a. Copy line 55, Total real estat	ıl Form 106A/B) e, from Schedule A/B		\$	160,000.00
	1b. Copy line 62, Total personal	property, from Schedule A/B		\$	68,472.00
	1c. Copy line 63, Total of all prop	perty on Schedule A/B		\$	228,472.00
Par	2: Summarize Your Liabilitie	s			
					iabilities nt you owe
2.	Schedule D: Creditors Who Have 2a. Copy the total you listed in C		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	171,259.07
3.	Schedule E/F: Creditors Who Ha 3a. Copy the total claims from P		I Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from P	art 2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	57,964.00
			Your total liabilities	\$	229,223.07
Par	3: Summarize Your Income a	and Evnenses			-
		•			
4.	Schedule I: Your Income (Officia Copy your combined monthly inc	come from line 12 of Schedule	ı I	\$	5,548.83
5.	Schedule J: Your Expenses (Officopy your monthly expenses fro			\$	3,173.00
Par	4: Answer These Questions	for Administrative and Stat	istical Records		
6.	Are you filing for bankruptcy u ☐ No. You have nothing to rep	•	heck this box and submit this form to the court with yo	our other sc	chedules.
7.	Yes What kind of debt do you have	?			
•	Your debts are primarily of	consumer debts. Consumer of	debts are those "incurred by an individual primarily for	a persona	I, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,035.68

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	14,312.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	14,312.00

	tor 1	Thomas Albright			
			dle Name Last Name		
	tor 2	First Name Midd	lle Name Last Name		
	. 0,		RN DISTRICT OF OHIO		
אווונ	eu States Dankit	upicy Court for the. NORTHE	KN DISTRICT OF ONIO		
Cas	e number				☐ Check if this is a amended filing
	–				
	icial Form				
5C	nedule	A/B: Property			12/15
	Yes. Where is the	e property?			
		,			
.1	24.46 Villo De		What is the property? Check all that apply		
.1	3146 Villa Dr. Street address, if ava		Single-family home	Do not deduct secured cla	
⊺.1				Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
.1	Street address, if ava	• ailable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secured	d claims on Schedule D:
.1	Street address, if ava	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
.1	Street address, if ava	• ailable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$160,000.00	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.00
.1	Street address, if ava	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.00 our ownership interest
.1	Street address, if ava	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$160,000.00 Describe the nature of years.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.00 our ownership interest
.1	Street address, if ava	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$160,000.00 Describe the nature of you (such as fee simple, tensor)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.0
1.1	Toledo City Lucas	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$160,000.00 Describe the nature of you (such as fee simple, tensor)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.00 our ownership interest
1.1	Street address, if ava	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$160,000.00 Describe the nature of you (such as fee simple, tensa a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$160,000.00 our ownership interest ancy by the entireties, o
1.1	Toledo City Lucas	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$160,000.00 Describe the nature of you (such as fee simple, tenda a life estate), if known.	current value of the portion you own? \$160,000.0 Sur ownership interest ancy by the entireties, o
1.1	Toledo City Lucas	ailable, or other description OH 43614-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$160,000.00 Describe the nature of you (such as fee simple, tenda a life estate), if known.	current value of the portion you own? \$160,000.0 Sur ownership interest ancy by the entireties, o

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

	(ehicles, motorcycles		
. Cars, van	ns, trucks, tractors, sport utility ve			
•	, ,			
□ No				
Yes				
3.1 Make:	· Volkswagen	Who has an interest in the property? Check one		laims or exemptions. Put ed claims on <i>Schedule D:</i>
Model	d: GTI	■ Debtor 1 only		ims Secured by Property.
Year:	2022	☐ Debtor 2 only	Current value of the	Current value of the
Appro	oximate mileage: 15,500	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other	information:	☐ At least one of the debtors and another		
l l	ation: 3146 Villa Dr., Toledo	<u>_</u>	¢40,000,00	¢40,000,00
OH 4	13614	Check if this is community property (see instructions)	\$40,000.00	\$40,000.00
		(366 manuchons)		
	_		Do not doduct engured o	laims or exemptions. Put
3.2 Make:		Who has an interest in the property? Check one		ed claims on <i>Schedule D:</i>
Model		Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
Year:		Debtor 2 only	Current value of the	Current value of the
	oximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	information:	\square At least one of the debtors and another		
goir	cart	☐ Check if this is community property	\$4,500.00	\$4,500.00
		(see instructions)		
		nd other recreational vehicles, other vehicles, an atercraft, fishing vessels, snowmobiles, motorcycle a		
Examples. ■ No □ Yes 5 Add the	: Boats, trailers, motors, personal water the second	atercraft, fishing vessels, snowmobiles, motorcycle a	accessories ny entries for	\$44 500 00
Examples. ■ No □ Yes 5 Add the	: Boats, trailers, motors, personal water the second	atercraft, fishing vessels, snowmobiles, motorcycle a	accessories ny entries for	\$44,500.00
No No Yes Add the pages you	e: Boats, trailers, motors, personal water boats, trailers, motors, personal water boats, trailers, motors, personal water boats, personal water between the personal water boats, personal water boat	vn for all of your entries from Part 2, including an	accessories ny entries for	\$44,500.00
Examples. No ☐ Yes Add the pages your pages your 3: Described.	e: Boats, trailers, motors, personal water and the control of the portion you over a control of the portion you over a cribe Your Personal and Household In	vn for all of your entries from Part 2, including and that number here	ny entries for	
Examples. No Yes Add the pages your sales.	e: Boats, trailers, motors, personal water and the control of the portion you over a control of the portion you over a cribe Your Personal and Household In	vn for all of your entries from Part 2, including an	ny entries for	\$44,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own Do you own Househo	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household in or have any legal or equitable in old goods and furnishings	vn for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured
No Yes Add the pages your own Part 3: Description of the page of	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household It nor have any legal or equitable in	vn for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured
Examples. No Yes Add the pages your own Househo Example. No	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household In or have any legal or equitable in old goods and furnishings es: Major appliances, furniture, linens	vn for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured
Examples. ■ No □ Yes 5 Add the pages your own Part 3: Desired to be paged	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household in or have any legal or equitable in old goods and furnishings	vn for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured
Examples. No ☐ Yes Add the pages your own Part 3: Desired to be pages your own Househo Example. ☐ No	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household In or have any legal or equitable in old goods and furnishings es: Major appliances, furniture, linens Describe	vn for all of your entries from Part 2, including and that number heretems nterest in any of the following items?	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own Househo Example. No	dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household In or have any legal or equitable in old goods and furnishings es: Major appliances, furniture, linens Describe	vn for all of your entries from Part 2, including an that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own Househo Example. No Yes. [dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household in or have any legal or equitable in old goods and furnishings as: Major appliances, furniture, linens Describe Household goods ics	vn for all of your entries from Part 2, including an that number here tems nterest in any of the following items? s, china, kitchenware deo, stereo, and digital equipment; computers, printer	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own. Househo Example. No Yes. [dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household In or have any legal or equitable in or have any legal or equitable in the pold goods and furnishings es: Major appliances, furniture, linens Describe Household goods are radios; audio, vicincluding cell phones, cameras, reserved.	vn for all of your entries from Part 2, including an that number here tems nterest in any of the following items? s, china, kitchenware deo, stereo, and digital equipment; computers, printer	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own. Househo Example. No Yes. [dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household in or have any legal or equitable in or have any legal or equitable in the pold goods and furnishings es: Major appliances, furniture, linens Describe Household goods: Es: Televisions and radios; audio, vices	vn for all of your entries from Part 2, including an that number here tems nterest in any of the following items? s, china, kitchenware deo, stereo, and digital equipment; computers, printer	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples. No Yes Add the pages your own. Househo Example. No Yes. [dollar value of the portion you ovou have attached for Part 2. Write cribe Your Personal and Household In or have any legal or equitable in or have any legal or equitable in the pold goods and furnishings es: Major appliances, furniture, linens Describe Household goods are radios; audio, vicincluding cell phones, cameras, reserved.	vn for all of your entries from Part 2, including an that number here tems nterest in any of the following items? s, china, kitchenware deo, stereo, and digital equipment; computers, printer	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

■ No

Official Form 106A/B Schedule A/B: Property page 2

Del	btor 1	Thomas Albright		Case number	(if known)
[☐ Yes.	Describe			
		ent for sports and hobles: Sports, photographic musical instruments		obby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
ı	No				
[☐ Yes.	Describe			
	_ ′	ns oles: Pistols, rifles, shotg	uns, ammunition, and	related equipment	
_	■ No	Describe			
_	Clothe: Examp ☐ No		urs, leather coats, des	gner wear, shoes, accessories	
ı	Yes.	Describe			
		Cloth	nes		\$500.00
ı	No		ostume jewelry, engaç	ement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
13.		rm animals			
	<i>Examp</i> ■ No	oles: Dogs, cats, birds, h	orses		
_		Describe			
_	Any ot	her personal and hous	ehold items you did	not already list, including any health aids you did r	not list
[☐ Yes.	Give specific informatio	n		
15.				art 3, including any entries for pages you have atta	sched \$2,400.00
Par	t 4: De	scribe Your Financial Ass	ets		
		vn or have any legal or		any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
_	_ `	oles: Money you have in	your wallet, in your ho	me, in a safe deposit box, and on hand when you file	your petition
	■ No □ Yes				
	Deposi	its of money oles: Checking, savings,	or other financial acco	unts; certificates of deposit; shares in credit unions, bi	okerage houses, and other similar
[□No	institutions. If you h	ave multiple accounts	with the same institution, list each.	
				Institution name:	
		17.1	checking	Huntington Bank	\$1,000.00
		17.2	. savings	Huntington	\$200.00

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Thomas Albright		Case number (if kno	own)
18.		s, mutual funds, or publicly tra		ge firms, money market accounts	
	■ No				
	☐ Yes.	Institu	ution or issuer name		
	joint	oublicly traded stock and intere venture	ests in incorporated	and unincorporated businesses, including an inte	erest in an LLC, partnership, and
	■ No				
	☐ Yes.	. Give specific information about Name of		% of ownership:	
20.	Nego Non-r	tiable instruments include persor	al checks, cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	■ No				
	⊔ Yes.	. Give specific information about Issuer na			
21.		ement or pension accounts aples: Interests in IRA, ERISA, Ke	eogh, 401(k), 403(b)	thrift savings accounts, or other pension or profit-sha	ring plans
	Yes.	. List each account separately.			
		Type of acc	ount:	Institution name:	
		403(b)		Hartford	\$20,372.00
	Exam _i ■ No	nples: Agreements with landlords	, prepaid rent, public	utilities (electric, gas, water), telecommunications con	npanies, or others
	☐ Yes.			Institution name or individual:	
23.	Annui ■ No	ities (A contract for a periodic pa	yment of money to y	ou, either for life or for a number of years)	
	☐ Yes.	Issuer name and	description.		
24.	26 U.S	sts in an education IRA, in an a s.C. §§ 530(b)(1), 529A(b), and 5.		ed ABLE program, or under a qualified state tuition	program.
	■ No □ Yes.	Institution name	and description. Sep	arately file the records of any interests.11 U.S.C. § 52	1(c):
25.	Trusts	s, equitable or future interests	in property (other t	han anything listed in line 1), and rights or powers	exercisable for your benefit
		. Give specific information about	them		
26.		ts, copyrights, trademarks, tra		er intellectual property m royalties and licensing agreements	
	■ No	,	•		
	☐ Yes.	. Give specific information about	them		
27.	_Exam	ses, franchises, and other general places: Building permits, exclusive		e association holdings, liquor licenses, professional lic	censes
	■ No □ Yes.	. Give specific information about	them		
Me		r property owed to you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	ebtor 1	Thomas Albright	Case number (if known)	
28.	Tax ref	funds owed to you		
	■ No	•		
	☐ Yes.	Give specific information about them, including whether you	ou already filed the returns and the tax years	
29.		support		
	_ ′	oles: Past due or lump sum alimony, spousal support, child	d support, maintenance, divorce settlement, property	settlement
	■ No	Cive energific information		
	□ res.	Give specific information		
30	Othor	amounts someone owes you		
50.		ples: Unpaid wages, disability insurance payments, disabili	ity benefits, sick pay, vacation pay, workers' comper	nsation, Social Security
		benefits; unpaid loans you made to someone else		
	■ No	Give specific information		
	□ 165.	Give specific information		
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings acc	count (HSA): credit homeowner's or renter's insurar	000
	■ No	oros. Hould, disability, of the insurance, hould savings use	south (1107), drout, fromcowner o, or ferrior o mountain	100
	☐ Yes.	Name the insurance company of each policy and list its va		
		Company name:	Beneficiary:	Surrender or refund value:
				74.401
32.		terest in property that is due you from someone who hare the beneficiary of a living trust, expect proceeds from a		eive property because
	_	one has died.		
	■ No	0		
	⊔ Yes.	Give specific information		
33.	Claims	s against third parties, whether or not you have filed a	lawsuit or made a demand for payment	
		oles: Accidents, employment disputes, insurance claims, o		
	■ No			
	☐ Yes.	Describe each claim		
34.	Other	contingent and unliquidated claims of every nature, ind	cluding counterclaims of the debtor and rights to	set off claims
	■ No			
	☐ Yes.	Describe each claim		
35.	Any fir	nancial assets you did not already list		
	■ No			
	☐ Yes.	Give specific information		
36	. Add t	the dollar value of all of your entries from Part 4, includ	ding any entries for pages you have attached	
		art 4. Write that number here		\$21,572.00
			'	
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an In	terest In. List any real estate in Part 1.	
	_ ′	own or have any legal or equitable interest in any business-re	lated property?	
		o to Part 6.		
ı	→ Yes. C	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property Y	ou Own or Have an Interest In.	
	пу	ou own or have an interest in farmland, list it in Part 1.		
46.		u own or have any legal or equitable interest in any fari	m- or commercial fishing-related property?	
	_	Go to Part 7.		
	□ Yes	s. Go to line 47.		
		■		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That \	You Did Not List Above	

page 5

Schedule A/B: Property

Official Form 106A/B

Deb	Inomas Albright		Case number (if known)		
_	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No				
_	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Write that	number here			\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$160,000.00
56.	Part 2: Total vehicles, line 5	\$44,500.00			
57.	Part 3: Total personal and household items, line 15	\$2,400.00			
58.	Part 4: Total financial assets, line 36	\$21,572.00			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54 +	\$0.00			
62.	Total personal property. Add lines 56 through 61	\$68,472.00	Copy personal property total	al -	\$68,472.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$228,472.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this information to identify your case:					
Debtor 1	Thomas Albright				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	ruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Ame	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
3146 Villa Dr. Toledo, OH 43614 Lucas County	\$160,000.00		\$160,000.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)
Household goods and furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line nom <i>Schedule AVB</i> . 0.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)
Electronics Line from Schedule A/B: 7.1	\$900.00		\$900.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Genedate A.D. 111			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
Clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line Hotti Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)
checking: Huntington Bank Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
LINE HOLL SCHEUULE AVD. 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debt	or 1 Thomas Albright			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	savings: Huntington Line from Schedule A/B: 17.2	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
'	Line Holli Schedule A/B. 1112			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
	403(b): Hartford Line from Schedule A/B: 21.1	\$20,372.00		\$20,372.00	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
'	Line Holli Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)(D)
[Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every No Yes. Did you acquire the property coverd No Yes	3 years after that for ca	ises fi	•	,

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this information	on to identify you	ır case:			
Debtor 1	homas Albrigh	nt			
	irst Name	Middle Name Last Name		-	
Debtor 2				_	
(Spouse if, filing) F	irst Name	Middle Name Last Name			
United States Bankru	ptcy Court for the	NORTHERN DISTRICT OF OHIO		_	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Forms 4	000				
Official Form 1					
Schedule D:	Creditors	Who Have Claims Secure	ed by Propert	:y	12/15
	litional Page, fill it	If two married people are filing together, both are cout, number the entries, and attach it to this form. y your property?			
☐ No. Check this	box and submit t	his form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in all o		•	J	•	
		bolow.			
<u> </u>	cured Claims		. Column A	Column B	Column C
for each claim. If more t	han one creditor has	more than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	ly	Value of collateral that supports this claim	Unsecured portion
2.1 BB&T/Truist		Describe the property that secures the claim:	\$4,493.07	\$4,500.00	\$0.00
Creditor's Name		2021 Ez-go Valor golf cart			
Attn: Bankru	•	As of the date you file, the claim is: Check all that apply.			
Wilson, NC 2		Contingent			
Number, Street, City,	State & Zip Code	☐ Unliquidated			
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the de		☐ Judgment lien from a lawsuit			
Check if this claim community debt	relates to a	Other (including a right to offset)			
Date debt was incurred	Opened 07/21 Last Active 3/09/23	Last 4 digits of account number 2105			

Official Form 106D

Date debt was incurred 3/09/23

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

Debtor 1	Thomas A	lbright		Case	number (if known)		
	First Name	Middle Na	ame Last Name		_		
00 5	madition Co	alit I India	Describe the account that account the ab		f27 402 00	£40,000,00	¢0.00
	pedition Creditor's Name	eait Unio	Describe the property that secures the cl		\$37,192.00	\$40,000.00	\$0.00
Cie	uitoi s ivame		2022 Volkswagen GTI 15,500 mi				
			Location: 3146 Villa Dr., Toledo	ОН			
			43614 As of the date you file, the claim is: Check	all that			
	89 Upper Af		apply.	all triat			
W	oodbury, MN	I 55125	☐ Contingent				
Nur	nber, Street, City, S	tate & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who ow	es the debt? C	heck one.	Nature of lien. Check all that apply.				
Debto	r 1 only		☐ An agreement you made (such as mortg	age or secured			
☐ Debto	r 2 only		car loan)				
☐ Debto	r 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At lea	st one of the deb	tors and another	☐ Judgment lien from a lawsuit	,			
	k if this claim re		☐ Other (including a right to offset)				
com	munity debt		· · · · · · · · · · · · · · · · · · ·				
		Opened					
		04/22 Last					
Data dah	t was incurred	Active 3/30/23	Last 4 digits of account number	5900			
Date deb	t was incurred	3/30/23	- Last 4 digits of account number				
00 14	0 T D I-		B		£400 574 00	\$4.00.000.00	#0.00
	& T Bank ditor's Name		Describe the property that secures the cl	aim:	\$129,574.00	\$160,000.00	\$0.00
Ole	ditor 3 reame		3146 Villa Dr. Toledo, OH 43614				
٨٠	tnı Dankrunt		Lucas County				
	tn: Bankrupt Box 844	Cy	As of the date you file, the claim is: Check	all that			
	ıffalo, NY 14	240	apply.				
-	•		Contingent				
Nur	nber, Street, City, S	tate & Zip Code	Unliquidated				
Who ow	es the debt? C	hook one	☐ Disputed Nature of lien. Check all that apply.				
_		neck one.	_				
Debto	•			age or secured			
Debto	•						
	r 1 and Debtor 2	•	Statutory lien (such as tax lien, mechanic	c's lien)			
	st one of the deb		☐ Judgment lien from a lawsuit				
	k if this claim re	lates to a	Other (including a right to offset)				
com	munity debt						
		Opened					
		08/20 Last					
		Active					
Date deb	t was incurred	4/01/23	Last 4 digits of account number	5922			
Add the	e dollar value of	your entries in C	olumn A on this page. Write that number h	ere:	\$171,259.07		
			the dollar value totals from all pages.		\$171,259.07		
write ti	hat number here):			VIII.,200101		
Part 2:	List Others to	o Be Notified fo	r a Debt That You Already Listed				
llee this			e notified about your bankruptcy for a deb	t that you alrea	adv listed in Part 1 For ex	ample if a collection	agency is
trying to	collect from you	u for a debt you o	we to someone else, list the creditor in Par	rt 1, and then li	ist the collection agency h	nere. Similarly, if you	have more
than one	creditor for any	of the debts that	you listed in Part 1, list the additional cred				
depts in	rart 1, do not fil	I out or submit th	is page.				
[]	Name Number 9	Street, City, State &	. Zin Code			c 3.4	
	BB&T/Truist	oncer, only, state of	Zip Code	On which line	e in Part 1 did you enter the	creditor?	
	Po Box 2521	7		Last 4 digits	of account number		
		em, NC 27114		=aat i digita			
		•					

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor	1 Thomas Alb	right		Case number (if known)
	First Name	Middle Name	Last Name	
	Name, Number, Str M & T Bank	eet, City, State & Zip Code		On which line in Part 1 did you enter the creditor?
	Po Box 900 Millsboro, DE	19966		Last 4 digits of account number

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in	this information to identify your ca	ise:		
Debtor	Thomas Albright			
	First Name	Middle Name Last Name		
Debtor (Spouse		Middle Name Last Nam	9	
	, 3,	NORTHERN DISTRICT OF OHIO		
	_			
Case r	number n)			☐ Check if this is an amended filing
Offici	ial Form 106E/F			
		no Have Unsecured Claim	S	12/15
Schedul left. Atta	le D: Creditors Who Have Claims Secur ach the Continuation Page to this page nd case number (if known).	ed Leases (Official Form 106G). Do not inclued by Property. If more space is needed, co. If you have no information to report in a Pa	py the Part you need, fill it out	, number the entries in the boxes on the
	any creditors have priority unsecured			
_	No. Go to Part 2.			
_	Yes.			
_				
Part 2:	List All of Your NONPRIORITY	Unsecured Claims		
3. Do	any creditors have nonpriority unsecu	red claims against you?		
	No. You have nothing to report in this par	t. Submit this form to the court with your other	schedules.	
	Yes.			
uns tha	secured claim, list the creditor separately f	ms in the alphabetical order of the creditor or each claim. For each claim listed, identify whe other creditors in Part 3.If you have more to	nat type of claim it is. Do not list	claims already included in Part 1. If more
				Total claim
4.1	Capital One/Menards	Last 4 digits of account numb	er <u>6789</u>	\$154.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 03/21 Last 3/18/23	Active
	Salt Lake City, UT 84130	When was the dept incurred:	3/10/23	
		As of the date you file, the cla	im is: Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	Number Street City State Zip Code	As of the date you file, the cla	im is: Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	_	im is: Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	im is: Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	.,,	
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsec	.,,	
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth	Contingent Unliquidated Disputed Type of NONPRIORITY unsections unity Obligations arising out of a seriority claims	ured claim: eparation agreement or divorce	•
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a committee.	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecurity ☐ Student loans ☐ Obligations arising out of a second	ured claim: eparation agreement or divorce	•

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	Thomas Albright	Case number (if known)				
4.2	Cbna Nonpriority Creditor's Name	Last 4 digits of account number	9467	\$191.00		
	Attn: Centralized BankruptcyDept Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 12/22 Last Active 3/17/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not			
	Yes	Other. Specify Charge Acc	count			
4.3	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7394	\$1,065.00		
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 06/18 Last Active 4/03/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.	d claim: aration agreement or divorce that you did not			
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing	og plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit Card				
4.4	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	2100	\$728.00		
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/22 Last Active 4/10/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit Card	I			

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	Thomas Albright		Case number (if known)	
4.5	Chase Card Services	Last 4 digits of account number	3445	\$490.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 05/22 Last Active 04/23	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.6	Citibank	Last 4 digits of account number	0690	\$365.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Levie MO 62470	When was the debt incurred?	Opened 02/15 Last Active 3/25/23	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.7	Citibank/Best Buy	Last 4 digits of account number	1130	\$3,109.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 11/19 Last Active 4/07/23	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	☐ Yes	Other. Specify Authorized		

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	Thomas Albright						
4.8	Citibank/The Home Depot	Last 4 digits of account number	7388	\$311.00			
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Authorized	user				
4.9	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	8256	\$158.00			
	Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 02/21 Last Active 3/16/23				
	St Louis, MO 63179						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	Debtor 1 only					
	Debtor 2 only	ebtor 2 only					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	☐ Debts to pension or profit-sharin					
	Yes	Other. Specify Charge Acc					
4.1 0	Citizens Bank Nonpriority Creditor's Name	Last 4 digits of account number	3803	\$753.00			
	6 Corporate Drive Shelton, CT 06484	When was the debt incurred?	Opened 01/20 Last Active 3/18/23				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	I				

Schedule E/F: Creditors Who Have Unsecured Claims

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1 Thomas Albright		Case number (if known)			
Costco Citi Card	Last 4 digits of account number	0856	\$504.00		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/21 Last Active 3/17/23			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
Debtor 1 only	Пол				
_	☐ Contingent ☐ Unliquidated				
Debtor 2 only	☐ Unliquidated ☐ Disputed				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Student loans	- Julii			
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	Other Specify Credit Card				
Goldman Sachs Bank USA	Last 4 digits of account number	2956	\$2,479.0		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 70379	When was the debt incurred?	Opened 05/21 Last Active 3/31/23			
Philadelphia, PA 19176 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin				
Yes	Other. Specify Credit Card	<u> </u>			
Huntington Bank	Last 4 digits of account number	8822	\$347.0		
Nonpriority Creditor's Name Attn: Bankruptcy 41 S High St	When was the debt incurred?	Opened 06/20 Last Active 4/02/23			
Columbus, OH 43215 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	■ Other. Specify Authorized	User			

Schedule E/F: Creditors Who Have Unsecured Claims

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Thomas Albright		Case number (if known)	
Huntington Bank	Last 4 digits of account number	2165	\$301.00
Nonpriority Creditor's Name Attn: Bankruptcy 11 S High St Columbus, OH 43215	When was the debt incurred?	Opened 10/22 Last Active 3/20/23	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐Yes	Other. Specify Credit Card	<u> </u>	
Navient/earnest Operat	Last 4 digits of account number	8474	\$14,312.00
lonpriority Creditor's Name P.o. Box 9655	When was the debt incurred?	Opened 05/21 Last Active 03/23	
Vilkes Barre, PA 18773 umber Street City State Zip Code Vho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	☐ Other. Specify		
	Educationa	I	
Pentagon FCU	Last 4 digits of account number	8701	\$12,570.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1432 Alexandria, VA 22313	When was the debt incurred?	Opened 05/21 Last Active 12/22	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Unsecured		

Schedule E/F: Creditors Who Have Unsecured Claims

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Thomas Albright		Case number (if known)		
Pentagon Federal Cr Un	Last 4 digits of account number	8206	\$9,772.00	
Nonpriority Creditor's Name	When was the debt incurred?	Opened 10/22 Last Active 4/16/23		
Number Street City State Zip Code	As of the date you file, the claim i			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
Check if this claim is for a community	Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
□Yes	Other. Specify Credit Card			
Pentagon Federal Credit Union	Last 4 digits of account number	5292	\$8,140.00	
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 09/21 Last Active		
P.O. Box 1432 Alexandria, VA 22313	When was the debt incurred?	12/22		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	Пол			
_	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	l claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
I No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	Other Specify Credit Card			
Syncb/Car Care Summi	Last 4 digits of account number	2243	\$366.00	
Nonpriority Creditor's Name			******	
Attn: Bankruptcy P.O. Box 965060	When was the debt incurred?	Opened 01/22 Last Active 4/06/23		
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	Continuent			
Debtor 2 only	☐ Contingent☐ Unliquidated			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed			
☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
☐ At least one or the debtors and another ☐ Check if this claim is for a community	Student loans			
debt		ration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims	Ç ,		
No	☐ Debts to pension or profit-sharin	• •		
☐ Yes	■ Other. Specify Charge Acc	count		

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Debtor	1 Thomas Albright	Case number (if known)				
4.2	Synchrony Bank/Care Credit	Last 4 digits of account number	3665	\$1,323.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 07/19 Last Active 3/14/23 s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other Specify Charge Acc				
4.2	Synchrony Bank/Gap	Last 4 digits of account number	9675	\$100.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 09/19 Last Active 3/19/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims				
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other Specify Credit Card				
4.2	Synchrony Bank/Lowes	Last 4 digits of account number	0005	\$68.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 06/21 Last Active 3/14/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify Charge Acc				
	□ 162	Other. Specify	Journ			

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Debtor 1 Thomas Albright		Case number (if known)			
4.2	Target Nb	Last 4 digits of account number	9834		\$358.00
<u> </u>	Nonpriority Creditor's Name C/O Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 06/21 3/22/23	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sep	aration agreement or o	livorce that you did not	
	Is the claim subject to offset?	report as priority claims		-11	
	■ No	Debts to pension or profit-shari		niiar debts	
	Yes	Other. Specify Credit Car	d		
Part :	3: List Others to Be Notified About a De	ebt That You Already Listed			
is tr hav	this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts th fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then lis	st the collection agency	here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did you	_		
	ital One/Menards Box 31293			h Priority Unsecured Clain	
	Lake City, UT 84131		Part 2: Creditors with	h Nonpriority Unsecured C	Claims
	3 ,	Last 4 digits of account number			
Name	and Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?	
Cbn		Line 4.2 of (Check one):	☐ Part 1: Creditors with	h Priority Unsecured Clain	ns
	Box 6497 Ix Falls, SD 57117		Part 2: Creditors with	h Nonpriority Unsecured C	Claims
0.00	A 1 alio, 65 07 117	Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?	
_	se Card Services Box 15369			h Priority Unsecured Clain	
	nington, DE 19850		Part 2: Creditors with	h Nonpriority Unsecured C	Claims
	<i>5</i> .	Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?	
	se Card Services			h Priority Unsecured Clain	
	Box 15369 nington, DE 19850		Part 2: Creditors with	h Nonpriority Unsecured C	Claims
	3 . ,	Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you	u list the original credite	or?	
_	se Card Services			h Priority Unsecured Clain	
	Box 15369 nington, DE 19850		Part 2: Creditors with	h Nonpriority Unsecured C	Claims
•••••	g.c.ii, 52 10000	Last 4 digits of account number			
Name	and Address	On which entry in Part 1 or Part 2 did you	u list the original credito	or?	
Citib	pank		_	h Priority Unsecured Clain	ns
	Box 6217	ı	Part 2: Creditors with	h Nonpriority Unsecured C	Claims
SIUU	x Falls, SD 57117	Last 4 digits of account number			
Name	and Address	On which entry in Part 1 or Part 2 did you			
	oank/Best Buy			h Priority Unsecured Clain	ns
	Box 6497 Ix Falls, SD 57117	I	Part 2: Creditors with	h Nonpriority Unsecured C	Claims
J.00		Last 4 digits of account number			

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Debtor 1 Thomas Albright		Case number (if known)
Name and Address Citibank/The Home Depot Po Box 6497 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Citibank/The Home Depot Po Box 6497 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Costco Citi Card Po Box 6190 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Goldman Sachs Bank USA Lockbox 6112 Philadelphia, PA 19170	On which entry in Part 1 or Part 2 did y Line 4.12 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Huntington Bank Huntington Banks Columbus, OH 43216	On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Huntington Bank Huntington Banks Columbus, OH 43216	On which entry in Part 1 or Part 2 did y Line 4.14 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Pentagon FCU 1001 N. Fairfax Alexandria, VA 22314	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Pentagon Federal Credit Union 1001 N Fairfax St Alexandria, VA 22314	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Syncb/Car Care Summi Po Box 71786 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did y Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Synchrony Bank/Care Credit C/o Po Box 965036 Orlando, FL 32896	On which entry in Part 1 or Part 2 did the Line 4.20 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Synchrony Bank/Gap Po Box 71727 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did the Line 4.21 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Synchrony Bank/Lowes Po Box 71727 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

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Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

Debtor 1 Thomas Albright	Case number (if known)		
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	
Target Nb	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 673 Minneapolis, MN 55440		■ Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 14,312.00
claims from Part 2	6~	Obligations original out of a consention agreement or diverse that		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 43,652.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 57,964.00

Fill in this information to identify your case:						
Debtor 1	Thomas Albright					
	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Case number						Check if this is an amended filing
						amenueu ming

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the o	contract or lease	State what the contract or lease is for			
2.1								
	Name				_			
	Number	Street			_			
	City		State	ZIP Code				
2.2								
	Name				_			
	Number	Street			_			
	City		State	ZIP Code	_			
2.3								
	Name				_			
	Number	Street			_			
	City		State	ZIP Code	_			
2.4								
	Name							
	Number	Street			_			
	City		State	ZIP Code	-			
2.5			<u> </u>					
	Name				_			
	Number	Street			_			
	City		State	ZIP Code	_			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Cill in this	information to identify your				
riii iii uiis	information to identify your				
Debtor 1	Thomas Albright	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case numb	per				☐ Check if this is an
					amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
1. Do y ■ No	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have yo	ı lived in a community pr	operty state or territor	v? (Community property	states and territories include
	a, California, Idaho, Louisiana				
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
1	Name			☐ Schedule E/F, lin	
_				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, lir	
				☐ Schedule G, line	
	Number Street	_		<u> </u>	
(City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

E:II	in this information to identify you	* 0000				1				
	in this information to identify you btor 1 Thomas A									
Del	btor 2 buse, if filing)				_					
	ited States Bankruptcy Court for	the: NORTHERN DISTRIC	CT OF OHIO							
	se number nown)		-	□ Ai	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:					
0	fficial Form 106I					M	M / DD/ \	/YYY		
S	chedule I: Your In	come								12/15
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this formation. If y Describe Employme Fill in your employment	our spouse is not filing wn. On the top of any additi	ith you, do not inclu	de infor	mati	on about	your spo mber (if	ouse. If me known). <i>A</i>	ore space is	needed,
	information.						□ Empl		ing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed				☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Wood County F	lospital						
	Occupation may include studer or homemaker, if it applies.	nt Employer's address	950 W. Wooster St. Bowling Green, OH 43402							
		How long employed t	here?				_			
Par	rt 2: Give Details About N	Ionthly Income								
spou If yo	mate monthly income as of the use unless you are separated. bu or your non-filing spouse have e space, attach a separate sheet	more than one employer, co	,	•	•			•	·	J
						For Deb	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sadeductions). If not paid month			2.	\$	8,	029.67	\$	N/A	
3.	Estimate and list monthly ov	ertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	8,02	9.67	\$	N/A	

Official Form 106l Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

applies

Yes. Explain:

5,548.83

Combined monthly income

12.

SIII	in this informa	tion to identify yo	our case:			I				
	tor 1					Choo	k if this is:			
Deb	iloi i	Thomas Albi	rignt				k if this is: An amended filing			
Deb	tor 2					_	ŭ	ving postpetition chapter		
(Spc	ouse, if filing)						13 expenses as of	the following date:		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO							MM / DD / YYYY			
Cas	e number									
(If kr	nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises				12/1		
Be info	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people a						
Par 1.	t 1: Descr Is this a join	ibe Your House	hold							
٠.	-									
	■ No. Go to		in a conar	ate household?						
			iii a sepaid	ate nousenolu:						
	□ No		st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Debt	or 2.			
2.	Do you have	e dependents?	■ No							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.						☐ Yes		
								□ No		
							<u> </u>	☐ Yes		
								□ No		
								☐ Yes		
								□ No		
3.	Do your exp	enses include	_		-		· -	☐ Yes		
	expenses of yourself and	f people other to d your depende	han nts? □	No Yes						
		ate Your Ongoi		y Expenses uptcy filing date unless	ven ere neine this f		nulament in a Cha	unton 12 anna ta namant		
exp								f the form and fill in the		
	•	•		government assistance luded it on <i>Schedule I:</i>	•					
(Off	ficial Form 10	6l.)					Your expe	enses		
4.		or home owners and any rent for the		ses for your residence. r lot.	Include first mortgag	e 4. \$		980.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
	•	rty, homeowner's				4b. \$		0.00		
			•	ipkeep expenses		4c. \$		50.00		
_		owner's associat			omo oquitu la	4d. \$		0.00		
5.	Additional f	nortgage payme	ents for yo	our residence, such as h	iome equity loans	5. \$		0.00		

Debtor 1	Thomas	Albright	Case num	ber (if known)	
i. Utili	ities:				
6a.	Electricity	, heat, natural gas	6a.	\$	230.00
6b.	Water, se	wer, garbage collection	6b.	\$	50.00
6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	90.00
6d.	Other. Sp	ecify:	6d.	\$	0.00
Foo	d and hous	ekeeping supplies		\$	400.00
Chil	dcare and	children's education costs	8.	\$	0.00
Clot	thing, laund	lry, and dry cleaning	9.	\$	100.00
. Pers	sonal care p	products and services	10.	\$	120.00
. Med	ical and de	ntal expenses	11.	\$	50.00
		Include gas, maintenance, bus or train fare.			
	•	ar payments.	12.	\$	200.00
. Ente	ertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
. Cha	ritable cont	ributions and religious donations	14.	\$	0.00
. Insu	ırance.				
Do r	not include ir	nsurance deducted from your pay or included in lines 4 or 20.			
15a.	. Life insura	ance	15a.	\$	0.00
15b.	. Health ins	surance	15b.	\$	0.00
15c.	. Vehicle in	surance	15c.	\$	86.00
15d.	. Other insu	urance. Specify:	15d.	\$	0.00
. Tax	es. Do not ir	nclude taxes deducted from your pay or included in lines 4 or 20.			
Spe			16.	\$	0.00
		ease payments:		•	
	. ,	ents for Vehicle 1	17a.	·	600.00
		ents for Vehicle 2	17b.	·	0.00
		ecify: Golf cart	17c.	\$	167.00
	. Other. Sp	•	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report a		¢	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106I)	18.		
. Oth Spe		s you make to support others who do not live with you.	19.	\$	0.00
	·	erty expenses not included in lines 4 or 5 of this form or on Sch		our Income	
		s on other property	20a.		0.00
	. Real estat		20b.		0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.		
				· -	0.00
		ner's association or condominium dues	20e.	· ·	0.00
. Otn	er: Specify:		21.	+\$	0.00
. Calc	culate your	monthly expenses			
		through 21.		\$	3,173.00
22b.	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	5,11010
				I	2 172 00
220.	. Auu IIIIE ZZ	a and 22b. The result is your monthly expenses.		\$	3,173.00
	-	monthly net income.		_	
23a.	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,548.83
23b.	. Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,173.00
					-
23c.		your monthly expenses from your monthly income.	23c.	\$	2,375.83
	The result	t is your monthly net income.	230.	Ψ	2,313.03
For e	example, do y	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yo terms of your mortgage?			or decrease because of a
□ Y		Explain here:			
_ T	c ∂.	Explain note.			

in this infor	mation to identify your	ouse.			
btor 1	Thomas Albright				
	First Name	Middle Name	Last Name		
btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
ited States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	Γ OF OHIO		
se number					
nown)					☐ Check if this is an amended filing
	m 106Dec				
eclarat	tion About a	an Individual	Debtor's Sch	edules	12/1
must file thi	is form whenever you fi	ile bankruptcy schedule n connection with a ban		laking a false state	ement, concealing property, or 00, or imprisonment for up to 20
must file thining mone	is form whenever you fi y or property by fraud i	ile bankruptcy schedule n connection with a ban	s or amended schedules. M	laking a false state	
must file thi aining mone rs, or both. 1	is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1	ile bankruptcy schedule n connection with a ban I 519, and 3571.	s or amended schedules. M	laking a false state iines up to \$250,00	ement, concealing property, or 00, or imprisonment for up to 20
must file thi aining mone rs, or both. 1	is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1	ile bankruptcy schedule n connection with a ban I 519, and 3571.	s or amended schedules. M kruptcy case can result in f	laking a false state iines up to \$250,00	
must file this aining mone rs, or both. 1 Sig Did you pa	is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1	ile bankruptcy schedule n connection with a ban I 519, and 3571.	s or amended schedules. M kruptcy case can result in f	laking a false state ines up to \$250,00 akruptcy forms?	00, or imprisonment for up to 20
must file thi aining mone rs, or both. 1 Sig Did you pa	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 In Below	ile bankruptcy schedule n connection with a ban I 519, and 3571.	s or amended schedules. M kruptcy case can result in f	laking a false state ines up to \$250,00 akruptcy forms?	00, or imprisonment for up to 20
Did you pa	is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 In Below In or agree to pay some	ile bankruptcy schedule n connection with a ban 1519, and 3571.	s or amended schedules. M kruptcy case can result in f	laking a false state ines up to \$250,00 akruptcy forms? Attach Bank Declaration	No, or imprisonment for up to 20 per control of the
Did you pa No Yes. Under penathat they ar	is form whenever you fit yor property by fraud in 8 U.S.C. §§ 152, 1341, 1 in Below Below Name of person Alty of perjury, I declare the true and correct.	ile bankruptcy schedule n connection with a ban 1519, and 3571.	s or amended schedules. M kruptcy case can result in f rney to help you fill out ban nmary and schedules filed v	laking a false state ines up to \$250,00 akruptcy forms? Attach Bank Declaration	No, or imprisonment for up to 20 pt 10 pt
Did you pa No Ves. Under penathat they ar X /s/ Thoma	is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 In Below In y or agree to pay some Name of person	ile bankruptcy schedule n connection with a ban 1519, and 3571.	s or amended schedules. M kruptcy case can result in f	aking a false state ines up to \$250,00 akruptcy forms? Attach Bank Declaration	No, or imprisonment for up to 20 pt 10 pt

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Fill in this	information to identify you	r case:			
Debtor 1	Thomas Albrigh				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case num	ber				
(if known)				_	Check if this is an amended filing
					amended ming
Officia	l Form 107				
	nent of Financial	Affairs for Individ	duals Filing for B	ankruntov	04/22
informatio	plete and accurate as poss n. If more space is needed,	attach a separate sheet to			
•	known). Answer every que	stion.			
Part 1:	Give Details About Your Ma	arital Status and Where You	Lived Before		
1. What	is your current marital statu	ıs?			
	Married				
	Not married				
2. Durin	g the last 3 years, have you	lived anywhere other than	where you live now?		
• .	de.				
_	No Yes. List all of the places you I	lived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
Debt	. ,	Dates Debtor 1	Debtor 2 Prior Ac		Dates Debtor 2
Debt	OI 1.	lived there	Debtor 2 i nor Ac	uicss.	lived there
	n the last 8 years, did you ev				
states and	territories include Arizona, Ca	ilifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	Visconsin.)
	No				
	es. Make sure you fill out Scl	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain the Sources of You	r Income			
4 5:1					
	ou have any income from er the total amount of income yo				ndar years?
If you	are filing a joint case and you	have income that you receive	e together, list it only once ur	nder Debtor 1.	
	No				
■ Y	es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From Jan	uary 1 of current year until	■ Wages, commissions,	\$27,000.00	☐ Wages, commissions,	
the date y	ou filed for bankruptcy:	bonuses, tips	• •	bonuses, tips	
		Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Debtor 1	1 Th	Thomas Albright						Case number (if known)				
				Debtor 1					Debtor 2			
For last calendar year:			Sources of income Gross income		re deductions and	Sources of income			Gross income (before deductions and exclusions)			
		dar year: December :	31, 2022)	■ Wages bonuses, t	, commissions, tips		\$89,538.00)	☐ Wages, combonuses, tips	missions,		
				☐ Operati	ing a business				☐ Operating a l	business		
		dar year bef December :		■ Wages bonuses, t	, commissions, tips		\$65,092.00)	☐ Wages, combonuses, tips	missions,		
				☐ Operati	ing a business				☐ Operating a I	business		
and wini	other nings. I each s	public benef f you are fili	it payments; ng a joint cas ne gross inco	pensions; re e and you h	ental income; inter ave income that y	rest; divi		ecte t onl	d from lawsuits; ly once under De	royalties; and btor 1.	ecurity, unemployment, d gambling and lottery	
				Debtor 1					Debtor 2			
			Sources of Describe b		each (befo	s income from source re deductions and sions)	Sources of income Describe below. Gross income (before de		Gross income (before deductions and exclusions)			
Part 3:	List	Certain Pa	yments You	Made Befo	re You Filed for	Bankrup	otcy					
6. Are □	either No.	Neither De individual puring the	ebtor 1 nor Dorimarily for a 90 days befo	ebtor 2 has personal, fa	amily, or househo	umer de ld purpo:	ots. Consumer del				1(8) as "incurred by an	
		□ No. □ Yes * Subject to	paid that cre not include	each creditor editor. Do no payments to	ot include paymer o an attorney for the	nts for do his bank	mestic support obl	ligat	tions, such as ch	ild support a	ne total amount you nd alimony. Also, do	
•	Yes.				e primarily consu for bankruptcy, di		ots. y any creditor a to	otal c	of \$600 or more?			
		No.	Go to line 7									
		□ Yes		ments for do	omestic support o		of \$600 or more a s, such as child su				creditor. Do not nclude payments to an	
Cre	editor'	s Name and	l Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	■ No□ Yes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	■ No □ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name						
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures										
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No											
	Yes. Fill in the details. Case title		Status of the case									
	Case number	Nature of the case	Court or agency									
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. No. Go to line 11.		erty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?						
	Yes. Fill in the information below.											
	Creditor Name and Address	Describe the Property Explain what happened	d	Date		Value of the property						
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became	otcy, did any creditor, inc		nancial institutio	n, set off any a	mounts from your						
	NoYes. Fill in the details.											
	Creditor Name and Address	Describe the action the	e creditor took	Date take	e action was n	Amount						
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possessi	ion of an assign	ee for the bene	efit of creditors, a						
	■ No □ Yes											
Pa	rt 5: List Certain Gifts and Contributions											
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gift	s with a total value	of more than \$6	00 per person	?						
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave	Value						
	Person to Whom You Gave the Gift and Address:											

Case number (if known)

Debtor 1 Thomas Albright

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Deb	otor 1 Thomas Albright		Case number (if known)					
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or			ns with a total	value of more than	\$600 to any charity?		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value		
Part	t 6: List Certain Losses							
	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did y	you lose anytl	ning because of thef	it, fire, other disaster,		
	■ No							
	☐ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lette amount that insurance has paid. Let claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost		
Dow	List Cartain Daymanta or Transfer	-						
Part	t 7: List Certain Payments or Transfer	<u> </u>						
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparir	ng a bankruptcy petition?			rty to anyone you		
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of		
	Address		transferred	City	or transfer was	payment		
	Email or website address Person Who Made the Payment, if Not	You			made			
	Ciolek Itd	lou	\$413 filing fee, credit report, c	redit	4/20/23	\$1,600.00		
	901 Washington St.		counseling	· ouit	., 20, 20	\$1,000.00		
	Toledo, OH 43604		\$1187 Attorney Fees					
	info@counselor.pro							
	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	r to make payments to your creditor		r transfer any prope	rty to anyone who		
	■ No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of		
	Address		transferred		or transfer was made	payment		
	Within 2 years before you filed for bank			sfer any prop	erty to anyone, othe	r than property		
	transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all	s made a	as security (such as the granting of a s	ecurity interes	t or mortgage on your	property). Do not		
	No							
	Yes. Fill in the details.		Barandan I I	.		Data		
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made		
	Person's relationship to you							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and	value of the pro	perty trans	ferred	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Depos	it Boxes, and St	orage Unit	s				
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No	ther financial accou	ınts; certificates	s of deposi					
	Yes. Fill in the details.								
		ast 4 digits of ccount number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed fo	r bankruptcy, a	ny safe dep	oosit box or other deposi	tory for securities,			
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	place other than you	r home within 1	year befor	e you filed for bankruptc	y?			
	Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?			
Par	19: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that some for someone.	one else owns? Inc	lude any proper	ty you borr	rowed from, are storing fo	or, or hold in trust			
	NoYes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value			
Par	110: Give Details About Environmental Inform	nation							
For t	the purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surfac	e water, ground						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		environmental	law, wheth	er you now own, operate	, or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardous	s waste, ha	zardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, reg	ardless of wher	n they occu	irred.				

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Debtor 1 Thomas Albright Case number (if known)

24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?										
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of a	ny release of hazardous material?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admi	nistrative proceeding under any en	vironi	mental law? Include settlements a	nd orders.						
	■ No □ Yes. Fill in the details.										
	Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case										
Par	11: Give Details About Your Business or C	onnections to Any Business									
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have a	any of	the following connections to any	business?						
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time										
	☐ A member of a limited liability compa	ny (LLC) or limited liability partners	hip (L	LP)							
	☐ A partner in a partnership										
	☐ An officer, director, or managing exec	cutive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation										
	■ No. None of the above applies. Go to Part 12.										
	☐ Yes. Check all that apply above and fill i	n the details below for each busines	ss.								
		Describe the nature of the business	3	Employer Identification number							
	Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed										
28.	Within 2 years before you filed for bankruptc institutions, creditors, or other parties.	y, did you give a financial statement	t to ar	nyone about your business? Inclu	de all financial						
	No										
	Yes. Fill in the details below.										
	Name Address (Number, Street, City, State and ZIP Code)										

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Thomas Albright	Case number (if known)								
Part 12: Sign Below									
are true and correct. I understand that making	Financial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.								
/s/ Thomas Albright									
Thomas Albright Signature of Debtor 1	Signature of Debtor 2								
Date April 24, 2023	Date								
Did you attach additional pages to Your State No ☐ Yes	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?								
Did you pay or agree to pay someone who is ■ No	not an attorney to help you fill out bankruptcy forms?								
☐ Yes. Name of Person . Attach the Ball	cruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								

Fill in this information to identify your case:						
Debtor 1	Thomas Albright					
Debtor 2 (Spouse, if filing)						
United States B	sankruptcy Court for the: Northern District of Ohio					
Case number (if known)						

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one o	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
1 th	ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6-re 6 months, add the income for all 6 months and divide the total couses own the same rental property, put the income from that	month peri	od would in the re	l be March 1 throusult. Do not includ	ugh Au de any	gust 31. If the amo	ount of your monthly incom ore than once. For examp	e varied during le, if both
					Colui Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and cor	nmissio	ons (before all	\$	8,035.68	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e paymer	its from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	\$	0.00	\$				
5.	Net income from operating a business, profession, or farm	Debtor '	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor '	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

					Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
7.	Interest, dividends	, and royalties			\$	0.00	\$		
8.	Unemployment cor	mpensation			\$	0.00	\$		
	the Social Security A	ount if you contend that the a Act. Instead, list it here:							
	For your spouse		^Ф	0.00					
0	, , ,	ent income. Do not include a	········'						
	benefit under the So not include any com United States Gover disability, or death o pay paid under chap does not exceed the	ent income. Do not include a icial Security Act. Also, excep pensation, pension, pay, ann imment in connection with a d of a member of the uniformed oter 61 of title 10, then include a amount of retired pay to which provision of title 10 other than	of as stated in the next sen uity, or allowance paid by isability, combat-related in services. If you received a that pay only to the exten ch you would otherwise be	tence, do the jury or ny retired t that it	\$	0.00	\$		
	Do not include any be received as a victim domestic terrorism; United States Governisability, or death of	ner sources not listed above penefits received under the Stof a war crime, a crime again or compensation, pension, partnent in connection with a diff a member of the uniformed the page and put the total belonger.	ocial Security Act; paymen ast humanity, or internation by, annuity, or allowance p isability, combat-related in services. If necessary, list	its al or aid by the jury or					
					\$	0.00	\$		
					\$	0.00	\$		
	Total amou	nts from separate pages, if a	ny.	+	\$	0.00	\$		
		Il average monthly income. add the total for Column A to		\$	8,035.68	+ \$_			8,035.68 otal average onthly income
Part	2: Determine H	ow to Measure Your Deduc	tions from Income						
12. 13.	Copy your total ave	erage monthly income from al adjustment. Check one:	line 11.					\$	8,035.68
	You are not ma	arried. Fill in 0 below.							
	☐ You are marrie	d and your spouse is filing wi	th you. Fill in 0 below.						
	Fill in the amou dependents, su Below, specify adjustments or	d and your spouse is not filing int of the income listed in line ich as payment of the spouse the basis for excluding this in a separate page. int does not apply, enter 0 be	11, Column B, that was N 's tax liability or the spous come and the amount of ir	e's suppor	t of someone	other th	nan you or your	depend	lents.
				_ \$		_			
				_ \$		_			
				_ +\$					
	Total			\$	0.00)c	opy here=>		0.00
14.	Your current mon	thly income. Subtract line 1	3 from line 12.					\$	8,035.68
15.		rrent monthly income for the						\$	8,035.68

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debto	r 1	Tho	mas Albright		Case number (if known)						
		M	ultiply line 15a by 12 (the number of months i	n a year).			(12				
	15	b. Th	ne result is your current monthly income for th	e year for this part of the	form	\$_	96,428.16				
16.	Cal	culate	the median family income that applies to	you. Follow these steps:							
	16a	. Fill ir	n the state in which you live.	ОН							
	16b	. Fill ir	n the number of people in your household.	1							
	16c	To fi	n the median family income for your state and nd a list of applicable median income amount uctions for this form. This list may also be ava	s, go online using the link		\$_	61,955.00				
17.	Hov	v do t	he lines compare?								
	17a	. 🗆	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do I								
	17b	. •	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Disposa							
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)							
18.	Cop	у уоц	ır total average monthly income from line	11.		\$	8,035.68				
19.	spo	tend tl use's i	ne marital adjustment if it applies. If you are not calculating the commitment period under income, copy the amount from line 13. • marital adjustment does not apply, fill in 0 or	11 U.S.C. § 1325(b)(4) al		- \$	0.00				
	19b	. Subt	tract line 19a from line 18.			\$	8,035.68				
20.	Cal	culate	your current monthly income for the year	Follow these steps:							
	20a	. Copy	/ line 19b			\$_	8,035.68				
		Multi	ply by 12 (the number of months in a year).			2	c 12				
	20b	. The	result is your current monthly income for the y	year for this part of the fo	rm	\$_	96,428.16				
	20c	Сору	the median family income for your state and	I size of household from I	ine 16c	\$_	61,955.00				
	21.	How	do the lines compare?								
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	rise ordered by the court,	on the top of page 1 of this form, ch	eck box 3,	The commitment				
			Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwise ordered l	by the court, on the top of page 1 of	this form, cl	heck box 4, The				
Part	4:	Sig	gn Below								
	By s	signing	g here, under penalty of perjury I declare that	the information on this st	atement and in any attachments is t	rue and cor	rect.				
Х	/s/	Tho	mas Albright								
			s Albright e of Debtor 1								
	_ `	A p	ril 24, 2023								
	14		I / DD / YYYY								
	-		cked 17a, do NOT fill out or file Form 122C-2		not form, convivour ourrant manthly	incomo from	a line 14 above				
	пус	u crie	cked 17b, fill out Form 122C-2 and file it with	una ionni. On inte as of tr	iat ioini, copy your current monthly	HOUSE HOU	i iii le 14 above.				

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

Official Form 122C-1

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Fill in this information to identify your case:			
Debtor 1 Thomas Albright			
Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the: Northern District of Ohio			
Case number(if known)	☐ Check if this	s is an amended	filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable I	ncome		04/22
To fill out this form, you will need your completed copy of Chapter 13 Stateme Commitment Period (Official Form 122C-1).	ent of Your Current Monthly Incom	ne and Calculation	ı of
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).			
Part 1: Calculate Your Deductions from Your Income			
The Internal Revenue Service (IRS) issues National and Local Standards for the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office.			
Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating ex 122C–1, and do not deduct any amounts that you subtracted from your spouse's	penses that you subtracted from inco	ome in lines 5 and 6	
If your expenses differ from month to month, enter the average expense.			
Note: Line numbers 1-4 are not used in this form. These numbers apply to inform	mation required by a similar form use	ed in chapter 7 case	es.
5. The number of people used in determining your deductions from inco	ome		
Fill in the number of people who could be claimed as exemptions on your for plus the number of any additional dependents whom you support. This number of people in your household.		1	
National Standards You must use the IRS National Standards to answ	wer the questions in lines 6-7.		
 Food, clothing, and other items: Using the number of people you entered Standards, fill in the dollar amount for food, clothing, and other items. 	d in line 5 and the IRS National	\$	785.00
7. Out-of-pocket health care allowance: Using the number of people you en	ntered in line 5 and the IRS National	Standards, fill in	

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are

higher than this IRS amount, you may deduct the additional amount on line 22.

page 1

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. Bada. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage o									
7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. \$ 75.00 Copy here=> \$ 75.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00 7g. Total. Add line 7c and line 7f. \$ 75.00 Copy total here=> \$ 75.00 Copy tota	eople wł	ho are under 65 years of age							
People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older 7f. Subtotal. Multiply line 7d by line 7e. 7g. Total. Add line 7c and line 7f. Substation of two parts: 153 153 154 155 155 155 155 155	7a. (Out-of-pocket health care allowance per person	\$	75					
People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 153 7e. Number of people who are 65 or older X 0 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00 7g. Total. Add line 7c and line 7f \$ 75.00 Copy total here=> \$ Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for boundard truly purposes into two parts: Housing and utilities - Insurance and operating expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgages and other debts secured by your home. To calculate the total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment for all mortgages and other debts secured by your home. Name of the creditor Average monthly payment for Bankruptcy. Next divide by 60. Name of the creditor Average monthly payment for Bankruptcy. Next divide by 60.	7b. 1	Number of people who are under 65	X	<u>1</u>					
7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older 7f. Subtotal. Multiply line 7d by line 7e. \$\frac{0.00}{0.00}\$ Copy here=> \$\frac{0.00}{0.00}\$ 7g. Total. Add line 7c and line 7f \$\frac{75.00}{0.00}\$ Copy total here=> \$\frac{1}{0.00}\$ Copy total here=> \$\frac{1}{0.00}\$ Total. Add line 7c and line 7f \$\frac{75.00}{0.00}\$ Copy total here=> \$\frac{1}{0.00}\$ Copy total here=> \$\frac{1}{0.00}\$ Total. Add line 7c and line 7f \$\frac{75.00}{0.00}\$ Copy total here=> \$\frac{1}{0.00}\$ Sased on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses: Using the number of people link specified in the specified in the dollar amount listed for your county for mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses: 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment M & T Bank Pagenet this	7c.	Subtotal. Multiply line 7a by line 7b.	\$	5.00	Copy here=>	> \$ _	75.0	00	
7e. Number of people who are 65 or older 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00 7g. Total. Add line 7c and line 7f. \$ 75.00 Copy total here=> \$ Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for ankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses O answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the operate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment M & T Bank \$ 980.00	eople wł	no are 65 years of age or older							
7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00 7g. Total. Add line 7c and line 7f \$ 75.00 Copy total here=> \$	7d. (Out-of-pocket health care allowance per person	\$	153					
7g. Total. Add line 7c and line 7f \$ 75.00 Copy total here=> \$	7e. I	Number of people who are 65 or older	X (D					
ocal Standards You must use the IRS Local Standards to answer the questions in lines 8-15. It is assed on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for ankruptcy purposes into two parts: It Housing and utilities - Insurance and operating expenses In Housing and utilities - Mortgage or rent expenses In Housing and utilities - Insurance and operating expenses: It is used for your county for insurance and operating expenses: It is used lollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment M & T Bank Pencet this	7f. \$	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	> \$ _	0.0	00	
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o answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the eparate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment M & T Bank \$ 980.00		ng and utilities - Insurance and operating exper	nses						
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9c. Net mortgage or rent expense.	Housin o answel eparate in Housin the House 9a. U	r the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be sing and utilities - Insurance and operating experience and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are calculated the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	be available at enses: Using t and operating fill in the dollar es. and other debts dd all amounts 0 months after Averag paymer	the bankrup he number of expenses. amount s secured by that are you file e monthly nt	your home.	ice. tered ir	843.	\$ 00 _	570.0
Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.	Housin o answel eparate i Hous in the Hous 9a. U 9b.	r the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be sing and utilities - Insurance and operating experience and utilities - Insurance and operating experience and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor M & T Bank 9b. Total average monthly payment.	be available at enses: Using t and operating fill in the dollar es. and other debts dd all amounts 0 months after Averag paymer	the bankrup he number of expenses. amount s secured by that are you file e monthly nt 980.00	your home.	ice. tered in	843.	\$ 00 _	570.0
0. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.	Housin o answel eparate in Housin the House 9a. U 9b.	r the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be in and utilities - Insurance and operating expetedollar amount listed for your county for insurance sing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at the contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor M & T Bank 9b. Total average monthly payment. Subtract line 9b (total average monthly payment) f	be available at enses: Using to and operating fill in the dollar es. and other debts dd all amounts 0 months after Averag paymer \$	the bankrup he number of expenses. amount s secured by that are you file e monthly nt 980.00	your home. Copy here=>	ice. tered in \$ _	980	00 0.00	Repeat this amount on line 33a.

btor 1	Thom	as Albright			Ca	se numbe	r (<i>if known</i>)			
11. L	ocal tra	nsportation expenses	: Check the number of vehi	cles for which you	claim an	owners	hip or operati	ng expense).	
	☐ 0. Go	to line 14.								
ı	1. Go	to line 12.								
[☐ 2 or m	ore. Go to line 12.								
			sing the IRS Local Standards perating Costs that apply for						\$	240.00
Υ	ou may		pense: Using the IRS Local if you do not make any loan							
Vehi	cle 1	Describe Vehicle 1:	2022 Volkswagen GTI Toledo OH 43614	15,500 miles Lo	cation:	3146 V	/illa Dr.,			
13a. C	Ownershi	ip or leasing costs using	g IRS Local Standard			\$	588.00	-		
	J	monthly payment for all clude costs for leased v	debts secured by Vehicle 1 rehicles.					-		
а	re contra		y payment here and on line cured creditor in the 60 mon							
	Nam	ne of each creditor for	Vehicle 1	Average month payment	ly					
	Exp	edition Credit Unio		\$ 660	.00					
		Total A	verage Monthly Payment	\$660	~~	Copy nere =>	-\$6		eat this unt on 33b.	
S	Subtract		f this number is less than \$0			\$	0.00	Copy ne Vehicle expense =>	1	0.00
	cle 2		r IDC Local Standard			\$	0.00	-		
13e. <i>A</i>		monthly payment for all	g IRS Local Standarddebts secured by Vehicle 2			Φ	0.00	-		
	Nam	ne of each creditor for	Vehicle 2	Average month payment	ly					
				\$						
		Total a	verage monthly payment	\$	ŀ	Copy nere => -\$ _	0	Repeat amount 33c.		
		cle 2 ownership or lease line 13e from line 13d. i	e expense f this number is less than \$0), enter \$0		\$	0.00	Copy ne Vehicle expense	2	0.00

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

0.00

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

0.00

Official Form 122C-2

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		s listed above,	you are allowed your monthly expenses	s for	
16.	self-employment taxes, so your pay for these taxes. H	cial security taxes, and Medic lowever, if you expect to rece rom the total monthly amoun	care taxes eive a tax	s. You may inc refund, you m	d local taxes, such as income taxes, slude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	1,940.00
17.	Involuntary deductions: contributions, union dues,	The total monthly payroll ded and uniform costs.	uctions th	at your job red	quires, such as retirement		
	Do not include amounts the	at are not required by your jo	b, such as	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include pay	ments that you make for your or life insurance on your depe	r spouse's	s term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	administrative agency, suc	The total monthly amount the has spousal or child support on past due obligations for sp	t payment	S.	by the order of a court or of ou will list these obligations in line 35.	\$	0.00
20.	Education: The total mont	thly amount that you pay for ϵ	education	that is either r	required:		
	for your physically or m	\$	0.00				
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool Do not include payments for any elementary or secondary school education.						0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.						0.00
23.	Optional telephone and to for you and your depender phone service, to the exterincome, if it is not reimburs. Do not include payments for expenses, such as those responses.	+\$	50.00				
24.	Add all of the expenses and lines 6 through 23.	allowed under the IRS expe	ense allov	vances.		\$	3,660.00
Add	litional Expense Deduction	ns These are additional d					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, or	or	
	Health insurance		\$	128.00			
	Disability insurance		\$	0.00			
	Health savings account	+	+\$	0.00			
	Total		\$	128.00	Copy total here=>	\$	128.00
	Do you actually spend this No. How much do	total amount? you actually spend?					
	Yes		\$				
26.	continue to pay for the rearyour household or membe	sonable and necessary care	and suppo no is unab	ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the							
	safety of you and your fam				es Act or other federal laws that apply.		

Official Form 122C-2

Debtor 1	Thomas Albright		Cas	se number (if kr	nown)					
	Additional home energy costs. Your hom line 8.	e energy costs are included i	in your insurance	e and opera	ating	expense	es on			
	If you believe that you have home energy c 8, then fill in the excess amount of home er		ome energy cos	ts included	in ex	penses	on line)		
	You must give your case trustee documents amount claimed is reasonable and necessary		s, and you must s	show that th	ne ad	ditional		\$		0.00
	Education expenses for dependent child \$189.58* per child) that you pay for your depublic elementary or secondary school.									
	You must give your case trustee documenta claimed is reasonable and necessary and n			explain why	the a	amount				
	* Subject to adjustment on 4/01/25, and every 3 years after that for cases begun on or after the date of adjustment.									0.00
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS Nation	nal Standards. T							
	To find a chart showing the maximum addit instructions for this form. This chart may als				sepa	rate				
	You must show that the additional amount of	laimed is reasonable and ne	cessary.					\$		0.00
	31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).					ncial				
	Do not include any amount more than 15%		\$		0.00					
	Add all of the additional expense deductions. Add lines 25 through 31.									00
Dedu	uctions for Debt Payment									
	33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.									
	o calculate the total average monthly paym reditor in the 60 months after you file for bar		contractually du	e to each s	ecure	ed				
	Mortgages on your home								rage monthly	,
33a.	Copy line 9b here						=>	\$	nent 980.0	0
	Loans on your first two vehicles							· —		<u> </u>
33b.	0 " 10"						=>	\$	660.0	0
33c.							=>	\$	0.0	
	Copy line 13e here							*-	0.0	_
33d.	List other secured debts: e of each creditor for other secured debt	Identify property that secu	res the debt		incl	es paym ude taxe nsuranc	es			
		2021 Ez-go Valor				No				
	BB&T/Truist	golf cart				Yes		\$	80.7	2
						No		_		_
						Yes		\$		
						103		Ψ —		_
						No				
						Yes	-	+\$_		_
]_			
33e	Total average monthly payment. Add lines	33a through 33d		\$	1,72	0.72	Copy total here=	,	1,720.	72

ine 24, All of the expenses allowed under IRS se allowances	\$	3,660.00
ine 32, All of the additional expense deductions	\$	128.00
ine 37, All of the deductions for debt payment	+\$	1,720.72
ne 37, All of the deductions for debt payment	+\$	

Total deductions....

Φ	5 508 72							

Copy total here=>

5,508.72

Debtor 1 Thomas Albright				Ca	ase nu	ımber (<i>if known</i>)					
Part 2:	Dete	ermine You	r Disposable Income Under 11 U.S.C.	§ 132	5(b)	(2)					
			ent monthly income from line 14 of Fourtent Monthly Income and Calculati				ı.		\$	1	8,035.68
ch dis red	ildren. sability p ceived i	The monthloayments for accordance	ly necessary income you receive for s y average of any child support payments or a dependent child, reported in Part I of se with applicable nonbankruptcy law to nded for such child.	s, foste Form	er ca 122	are payments, or C-1, that you		\$	0.00		
em in	nployer 11 U.S.	withheld fro C. § 541(b)	etirement deductions. The monthly total m wages as contributions for qualified re(7) plus all required repayments of loans § 362(b)(19).	etireme	ent p	olans, as specified	d	\$	0.00	_	
42. To	tal of a	II deductio	ns allowed under 11 U.S.C. § 707(b)(2)(A). C	Сору	line 38 here =	=>	\$ 5,50	8.72		
ex the	penses eir expe	and you hanses. You r	al circumstances. If special circumstance on reasonable alternative, describe the following size of the special circumstance of the special ci	ne spe	cial	circumstances ar	nd			-	
Descr	ibe the	special cir	cumstances			Amount of exp	ens	е			
					9	\$					
					— S						
					_	· -		_			
				Г			_				
			1	otal	\$_	0.00		Copy sere=> \$		0.00	
44. To	otal adji	ustments. A	Add lines 40 through 43.			=>	\$_	5,508.72		opy re=> - \$	5,508.72
45. C a	ılculate	your mont	thly disposable income under § 1325(b)(2).	Sub	tract line 44 from	line	39.		\$	2,526.96
Part 3:	Cha	nge in Inco	ome or Expenses								
ha tim yo	ve char ne your u filed y	nged or are case will be our petition	r expenses. If the income in Form 1220 virtually certain to change after the date open, fill in the information below. For earth, check 122C-1 in the first column, enter n when the increase occurred, and fill in	you fil xampl line 2	ed y le, if in th	our bankruptcy p the wages report ne second columi	etitio ted i n, ex	on and during the ncreased after	Э		
Form		Line	Reason for change			Date of change	е	Increase or decrease?	A	mount of ch	ange
☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease	\$		
☐ 122 ☐ 122 ☐ 122	C-2							☐ Increase ☐ Decrease ☐ Increase	\$		

□ 122C-2

☐ Decrease

Debtor 1	Thomas Albright	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the in	oformation on this statement and in any attachments is true and correct.
Х	/s/ Thomas Albright	
-	Thomas Albright	
	Signature of Debtor 1	
Date	April 24, 2023	

Official Form 122C-2

MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2022 to 03/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Wood County Hospital

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\\$71,730.00}{\\$94,000.05}\$ from check dated \$\frac{\\$9/30/2022}{\\$12/31/2022}\$.

This Year:

Current Year-to-Date Income: \$25,944.00 from check dated 3/31/2023.

Income for six-month period (Current+(Ending-Starting)): \$48,214.05 .

Average Monthly Income: **\$8,035.68**.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

Prior to the filing of this statement I have received \$ 1,18 Balance Due \$ 1,40 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and a I have agreed to share the above-disclosed compensation with a person or persons who are not members or associated copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, inclusional and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings therefore the debtor with secured creditors to reduce to market value; exemption planning; preparate reaffirmation agreements and applications as needed; preparation and filing of motions purs 522(f)(2)(A) for avoidance of liens on household goods.	or(s) and that
DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 2,58 Prior to the filing of this statement I have received \$ 1,18 Balance Due \$ 1,40 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and a place of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, inclusion. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petit b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thered. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; prepara reaffirmation agreements and applications as needed; preparation and filing of motions purs 522(f)(2)(A) for avoidance of liens on household goods.	or(s) and that for services rendered or to 587.00
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	ereof;
 By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief any other adversary proceeding. 	ef from stay actions or
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representat this bankruptcy proceeding.	ation of the debtor(s) in
April 24, 2023 /s/ Scott A. Ciolek	
Date Scott A. Ciolek 0082779	
Signature of Attorney Ciolek ltd	
901 Washington St.	
Toledo, OH 43604	
419-740-5935 Fax: 866-890-0419	
info@counselor.pro Name of law firm	

United States Bankruptcy Court Northern District of Ohio

In re	Thomas Albright		Case No.							
		Debtor(s)	Chapter	13						
VERIFICATION OF CREDITOR MATRIX										
Γhe ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and corn	rect to the best	of his/her knowledge.						
Date:	April 24, 2023	/s/ Thomas Albright								
		Thomas Albright								
		Signature of Debtor								

BB&T/Truist Attn: Bankruptcy Po Box 1847 Wilson, NC 27894

BB&T/Truist Po Box 25217 Winston Salem, NC 27114

Capital One/Menards Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One/Menards Po Box 31293 Salt Lake City, UT 84131

Cbna
Attn: Centralized BankruptcyDept
Po Box 790034
St Louis, MO 63179

Cbna Po Box 6497 Sioux Falls, SD 57117

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Chase Card Services Po Box 15369 Wilmington, DE 19850

Citibank Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank Po Box 6217 Sioux Falls, SD 57117 Citibank/Best Buy Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank/Best Buy Po Box 6497 Sioux Falls, SD 57117

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank/The Home Depot Po Box 6497 Sioux Falls, SD 57117

Citizens Bank 6 Corporate Drive Shelton, CT 06484

Costco Citi Card Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117

Costco Citi Card Po Box 6190 Sioux Falls, SD 57117

Expedition Credit Unio 6789 Upper Afton Rd Woodbury, MN 55125

Goldman Sachs Bank USA Attn: Bankruptcy Po Box 70379 Philadelphia, PA 19176

Goldman Sachs Bank USA Lockbox 6112 Philadelphia, PA 19170 Huntington Bank Attn: Bankruptcy 41 S High St Columbus, OH 43215

Huntington Bank Huntington Banks Columbus, OH 43216

M & T Bank Attn: Bankruptcy Po Box 844 Buffalo, NY 14240

M & T Bank Po Box 900 Millsboro, DE 19966

Navient/earnest Operat P.o. Box 9655 Wilkes Barre, PA 18773

Pentagon FCU Attn: Bankruptcy Po Box 1432 Alexandria, VA 22313

Pentagon FCU 1001 N. Fairfax Alexandria, VA 22314

Pentagon Federal Cr Un

Pentagon Federal Credit Union Attn: Bankruptcy P.O. Box 1432 Alexandria, VA 22313

Pentagon Federal Credit Union 1001 N Fairfax St Alexandria, VA 22314 Syncb/Car Care Summi Attn: Bankruptcy P.O. Box 965060 Orlando, FL 32896

Syncb/Car Care Summi Po Box 71786 Philadelphia, PA 19176

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896

Synchrony Bank/Care Credit C/o Po Box 965036 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Gap Po Box 71727 Philadelphia, PA 19176

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Po Box 71727 Philadelphia, PA 19176

Target Nb C/O Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440

Target Nb Po Box 673 Minneapolis, MN 55440